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NAME OF OFFEROR OR CONTRACTOR
ROOZ ALLEN & HAMILTON INC: 1107242

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DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service National Institutes of Health

Phone: 301\228-4220 FAX: 301\228-4240

National Cancer Institute Office of Acquisitions 244 Miller Drive, P.O. Box B, Room 106 Ft. Detrick, Frederick, MD 21702-1201

Booz Allen Hamilton, Inc. 8th Floor 1101 Wootton Pkwy Rockville, MD 20852

Attention:

Ms. Anna Marie Scott, Contract Representative

Reference:

Contract No. HHSN263999900046I/HHSN26100001

Modification 1

Dear Ms. Scott,

Enclosed is an executed copy of the above mentioned contract modification for your retention. Correspondence regarding the terms and conditions of the referenced contract should be submitted to:

C. Timothy Crilley, Contracting Officer National Cancer Institute at Frederick NCI Office of Acquisitions P.O. Box B, 244 Miller Drive, Room 116A Ft. Detrick, Frederick, MD 21702-1201

Again, you are reminded that the Contracting Officer is the only official authorized to make changes in the contract.

If you have any questions, please feel free to call the undersigned on 301/228-4224 or Mandie S. White, Contract Specialist at 301/228-4217 or whitems@mail.nih.gov.

Sincerely

C. Timothy Crilley Contracting Officer, NCI

Enclosure

Heidi Hiller Heidi BAH. com

2. AMERICANDATION NO. 3. EFFECTIME DATE 1914377 PARTICIPATION NO. 3. EFFECTIME DATE 191437 PARTICIPAT	AMENDINE	ENT OF SOLICITATION/MODIFIC	CATION OF CONTRACT		CONTRACT ID CODE	PAGE	OF PAGES
See Block 16C See Block 16C 1914377 National Institutes of Health NIH Info Tech Acquisition and Assessment Center Assessment Center Assessment Center Assessment Center And 200982-7511 NIH Info Tech Acquisition and NIH Info	2. AMENDME	NT/MODIFICATION NO	3 FEFECTIVE DATE	A PEO	HISTION/DIDCHASE DEC NO	1 1	
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SOCA ALLEN & HAMILTON INC:1107242 SOCA ALLEN & HAMILTON INC HAMILTON INC SOCA ALLEN & HAMILTON INC HAMILTON INC HAMILTON INC HAMILTON INC HAMILTON I	8. NAME AND	ADDRESS OF CONTRACTOR (No., stree	t, county, State and ZIP Code)	(m) 9A.	AMENDMENT OF SOLICITATION NO.		
FACILITY CODE	BOOZ ALI 8283 GRE	LEN & HAMILTON INC EENSBORO DRIVE	07242	9B. × 10A × HH	DATED (SEE ITEM 11) . MODIFICATION OF CONTRACT/ORDER NOT SN263999900046I SN26100001	0.	
The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers Offers must advisowedge receipt of this amendment prior to the hour and date specified from receipt of Offers Offers must advisowedge receipt of this amendment in the hour and date specified in the suicidiation or as amended by one of the following methods: (a) By completing Items B and 15, and returning Departed Netter or releigenar which includes a reference to the solicitation and amendment, (b) By advisorabely are receipt of this amendment on each road; or (c) By separate Netter or releigenar which includes a reference to the solicitation and amendment numbers. Pallute GP OFFERS ANKONICEDEGMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN RELIECTION OF YOUR OFFER. If by Window of this amendment you desire to change an offer areasy submitted. Such range may be seeded by telegram or letter; provided each fellogram of letter makes Interested to the solicitation and this amendment and its mostived prior to the colemna hour and date specified 1. ACCOUNTING AM APPROPRIATION DATA (Programs y Juniority) 1. THIS TIEM ONLY APPLIES TO MODIFICATION OF CONTRACTIONDERS. IT MODIFIES THE CONTRACTIONDER NO. AS DESCRIBED IN TIEM 14. ORIGIN ONE 1. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation reads, ac., 25 ET FORTH IN TIEM 14, PURSUANT TO THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation reads, ac., 25 ET FORTH IN TIEM 14, PURSUANT TO THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation reads, ac., 25 ET FORTH IN TIEM 14, PURSUANT TO THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation reads, ac., 25 ET FORTH IN TIEM 14, PURSUANT TO THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation reads, ac., 25 ET FORTH IN TIEM 14, PURSUANT TO THE ADMINISTRATIVE CHANGE	CODE		FACILITY CODE		5/14/2010		
The above numbered solicitation is amended as set forth in term 14. The hour and date specified for receipt of Offiers The control of the control of the solicitation are summed. The control of the solicitation or as amended, by one of the following methods (ii) By completing Second of the control of the solicitation and provided in the solicitation are summed. The control of the solicitation are summed on each opy of the offer submitted, or (i) by Separates before of the span which includes a reference to the solicitation and amendment of the control of the solicitation and amendment on each opy of the offer submitted, or (i) by Separates before of the span which includes a reference to the solicitation and the summed of the solicitation and the solicitation and the summed of the solicitation and this amendment, and is received proof to the opening hour and date specified. Second of the control of the control of the control of the solicitation and the summed of the solicitation and this amendment, and is received proof to the opening hour and date specified. Second of the control of the solicitation and the summed of the solicitation and solicitation and solicitation of the control of the solicitation and solicitation of the control of the control of the control of the solicitation of the control of the co			11. THIS ITEM ONLY APPLIES TO		,,		
A THIS CHANGE ORDER IS ISSUED PURSUANT TO (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER ION IN ITEM 10A. B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation dake, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.105(b). C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF: D. OTHER (Specify type of modification and authority) X. FAR 52.217-9, Option to Extend the Term of the Contract E. IMPORTANT: Contractor E. IMPORTANT: Co	separate let THE PLACE virtue of this reference to	tter or telegram which includes a reference E DESIGNATED FOR THE RECEIPT OF is amendment you desire to change an offer the solicitation and this amendment, and TING AND APPROPRIATION DATA (If received as a constant of the edule	to the solicitation and amendment nu OFFERS PRIOR TO THE HOUR AND or already submitted, such change may is received prior to the opening hour a puired) No	mbers. FAII DATE SPE y be made b and date spe et Inc:	LURE OF YOUR ACKNOWLEDGEMENT TO CIFIED MAY RESULT IN REJECTION OF YOU telegram or letter, provided each telegram or cified.	BE RECEIVED OUR OFFER. letter makes	DAT If by
B. THE ABOVE NUMBERED CONTRACTIONEDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, stc.) SET FORTH IN THEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b). C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF. D. OTHER (Specify type of modification and authority) X FAR 52.217-9, Option to Extend the Term of the Contract E.IMPORTANT: Contractor E.IMPORTANT: Contractor E.IMPORTANT: Contractor Dis required to sign this document and return Opies to the issuing office. 14. DESCRIPTION OF AMENDMENTMODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.) See HHSN2639999000461 for contract terms and conditions. The purpose of Modification 0002 is to exercise the option to cover the 3 month transition operiod of 01/15/11-04/14/11. Please contact COTR, Dwayne Forquer at 301-594-3069 or requisitioner, Collen Ennis at 301-443-1911 for invoicing instructions and payment questions or concerns. ADB Document#: D1000072 Discount Terms: PROMPT PAY Delivery Location Code: 6116 EXE BLVD, ROCKVL 5116 Executive Blvd, Rockville Continued Except as provided herein, all terms and conditions of the document referenced in item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect. 15A NAME AND TITLE OF SIGNER (Type or print) CHARLES T. CRILLEY 16B. CONTRACTOR/OFFEROR 15C DATE SIGNED 16C DATE SIGNED (Signature of person authorized to sign) (Signature of person authorized to sign)		13. THIS ITEM ONLY APPLIES TO M	ODIFICATION OF CONTRACTS/ORD	ERS. IT MO	DIFIES THE CONTRACT/ORDER NO. AS DES	SCRIBED IN IT	TEM 14.
EIMPORTANT: Contractor Sis not Sequired to sign this document and return copies to the issuing office. 14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.) See HHSN263999900046I for contract terms and conditions. The purpose of Modification 0002 is to exercise the option to cover the 3 month transition operiod of 01/15/11-04/14/11. Please contact COTR, Dwayne Forquer at 301-594-3069 or requisitioner, Collen Ennis at 301-443-1911 for invoicing instructions and payment questions or concerns. ADB Document#: D1000072 Discount Terms: PROMPT PAY Delivery Location Code: 6116 EXE BLVD, ROCKVL 5116 Executive Blvd, Rockville Continued Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect. 15A NAME AND TITLE OF SIGNER (Type or print) CHARLES T. CRILLEY 15B. CONTRACTOR/OFFEROR 15C. DATE SIGNED 16B. UNITED STATES OF AMERICA 16C. DATE SIGNED 16C. DATE SIGNED	CHECK ONE	B. THE ABOVE NUMBERED CONTRAC appropriation date, etc.) SET FORTH	CT/ORDER IS MODIFIED TO REFLEC IN ITEM 14, PURSUANT TO THE AI	CT THE ADM	MINISTRATIVE CHANGES (such as changes in OF FAR 43.103(b).		
EMPORTANT: Contractor		D. OTHER (Specify type of modification	and authority)				
EMPORTANT: Contractor	Х	FAR 52.217-9, Option	to Extend the Term	n of th	ne Contract		
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.) See HHSN263999900046I for contract terms and conditions. The purpose of Modification 0002 is to exercise the option to cover the 3 month transition period of 01/15/11-04/14/11. Please contact COTR, Dwayne Forquer at 301-594-3069 or requisitioner, Collen Ennis at 301-443-1911 for invoicing instructions and payment questions or concerns. ADB Document#: D1000072 Discount Terms: PROMPT PAY Delivery Location Code: 6116 EXE BLVD, ROCKVL 5116 Executive Blvd, Rockville Continued Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect. 15A NAME AND TITLE OF SIGNER (Type or print) CHARLES T. CRILLEY 15B. CONTRACTOR/OFFEROR 15C. DATE SIGNED (Signature of person authorized to sign) (Signature of person authorized for sign)	E. IMPORTAN					office	
ADB Document#: D1000072 Discount Terms: PROMPT PAY Delivery Location Code: 6116 EXE BLVD, ROCKVL 6116 Executive Blvd, Rockville Continued Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect. 15A. NAME AND TITLE OF SIGNER (Type or print) CHARLES T. CRILLEY 15B. CONTRACTOR/OFFEROR (Signature of person authorized to sign) (Signature of Contracting Officer)	See HHSN The purp	N263999900046I for co	ntract terms and co	nditio	ns.		ansition
15A. NAME AND TITLE OF SIGNER (Type or print) CHARLES T. CRILLEY 15B. CONTRACTOR/OFFEROR 15C. DATE SIGNED (Signature of person authorized to sign) 16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) CHARLES T. CRILLEY 16B. UNITED STATES OF AMERICA (Signature of Contracting Officer)	301-443- ADB Docu Discount Delivery 5116 Exe Continue	-1911 for invoicing in ument#: D1000072 Terms: PROMPT PAY Location Code: 6116 ecutive Blvd, Rockvilled	nstructions and pay EXE BLVD,ROCKVL le	ment q	uestions or concerns.		
CHARLES T. CRILLEY 15B. CONTRACTOR/OFFEROR 15C. DATE SIGNED 16B. UNITED STATES OF AMERICA (Signature of person authorized to sign) (Signature of Contracting Officer)							
15B. CONTRACTOR/OFFEROR 15C. DATE SIGNED 16B. UNITED STATES OF AMERICA 16C. DATE SIGNED (Signature of person authorized to sign) (Signature of Contracting Officer)							
(algrada or contacting onter)	15B. CONTRA	CTOR/OFFEROR	15C. DATE SIGNED				16C. DATE SIGNED
					(Signature of Contracting Officer)		

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
HHSN2639999000461/HHSN26100001/0002

PAGE 2

OF 8

NAME OF OFFEROR OR CONTRACTOR
BOOZ ALLEN & HAMILTON INC:1107242

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
-	6116 Executive Blvd				
	Rockville MD 20852 US	1			
	Payment:				
	NIH Commercial Accts				
	Commercial Accounts Branch				
	2115 East Jefferson St, MSC 8500	1			
	Room 4B-432				
	Bethesda				
	MD 20892-8500				
	FOB: Destination			- 10	
	Period of Performance: 06/15/2010 to 04/14/2011				
	reflod of reflormance. 00/13/2010 to 04/14/2011				
	Add Item 5 as follows:				
	Special Handling: None				
5	402 - HHSN263999900046I, Task Order C2730, Booz	1			3,043,701.
	Allen Hamilton, caBIG Program Management Support			10	
	contract, POP 1/15/11-4/14/11				
	Delivery To: 6116/501	1			
	Product/Service Code: R499				
	Product/Service Description: OTHER PROFESSIONAL			1	
	SERVICES				
	Project Data:				
	125837.1.HNC1D NCI OD CBIIT CTR BIOMEDICAL				
	INFORMATICS & INFORMATION.2555 RESEARCH AND	İ			
	DEVELOPMENT.12/14/2010			·	
	Accounting Info:				
	08024920111DA0.2011.01.C100.HNC1D00000C.E.00016.40				
	6.C283.2555.610001.9999.9999.9999				
	Funded: \$3,043,701.80				
	Add Item 6 as follows:				
			11		
	Special Handling: None	1			
6	402 - HHSN263999900046I, Task Order C2730, Booz				30,437.
	Allen Hamilton, caBIG Program Management Support				
	contract, POP 1/15/11-4/14/11, 1% NITAAC Fee				
	Delivery To: 6116/501	1			
	Product/Service Code: R499				
	Product/Service Description: OTHER PROFESSIONAL				
	SERVICES				
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	Project Data:				
	125837.1.HNC1D NCI OD CBIIT CTR BIOMEDICAL				
	INFORMATICS & INFORMATION.2555 RESEARCH AND				
	Continued				
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REFERENCE NO. OF DOCUMENT BEING CONTINUED
HHSN2639999000461/HHSN26100001/0002

PAGE OF 8

NAME OF OFFEROR OR CONTRACTOR

EM NO.	SUPPLIES/SERVICES	QUANTITY	1 1	UNIT PRICE	AMOUNT
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	DEVELOPMENT.12/14/2010				
	Accounting Info:				
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AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT				CONTRACT ID CODE		PAGE OF PAGES		
2. AMENDMENT/MODIFICATION NO.	To FEFFORM	DATE	1			1	2	
	3. EFFECTIVE		4. 1	REQUISITION/PURCHASE REQ. NO.	5. PR	OJECT NO	. (If applicable)	
0003 6. ISSUED BY CODE	See Blo		7	ADMINISTEDED DV (15 - 15 - 16 - 16 - 17	2005			
National Institutes of Healt NIH Info Tech Acquisition ar Assessment Center Bethesda MD 20892-7511		/NITAAC	Na NI As	ADMINISTERED BY (If other than Item 6) Ational Institutes of Head ITH Info Tech Acquisition assessment Center Atherical Center Atherical Center Atherical Center Center Atherical Center		ADM-	OLAO/NITAAC	
8. NAME AND ADDRESS OF CONTRACTOR (No., stree	t, county, State and	1 ZIP Code)	(x)	9A. AMENDMENT OF SOLICITATION NO.	-			
300Z ALLEN & HAMILTON INC:11 3283 GREENSBORO DRIVE 4CLEAN VA 221023838	07242			9B. DATED (SEE ITEM 11)				
				10A MODIFICATION OF CONTRACT/ORDER N HHSN263999900046I HHSN26100001 10B. DATED (SEE ITEM 13)	O.			
CODE	FACILITY COI	DE		06/14/2010				
	11. THIS IT	EM ONLY APPLIES TO A	MEN	IDMENTS OF SOLICITATIONS				
CHECK ONE A. THIS CHANGE ORDER IS ISSUED FORDER NO. IN ITEM 10A.	ODIFICATION C	(Specify authority) THE	CHA	MODIFIES THE CONTRACT/ORDER NO. AS DES	HE COI	NTRACT	14.	
				ADMINISTRATIVE CHANGES (such as changes I ITY OF FAR 43.103(b).	n payin	ng office,		
C. THIS SUPPLEMENTAL AGREEMEN	T IS ENTERED	INTO PURSUANT TO A	UTH	ORITY OF:				
X Mutual Agreement	and and and							
D. OTHER (Specify type of modification	and authority)							
	(C)	o sign this document and		2				
EIMPORTANT: Contractor Lis not. 14. DESCRIPTION OF AMENDMENT/MODIFICATION See HHSN2639999000461 for co.	(Organized by U	ICF section headings, inc	cludir	ng solicitation/contract subject matter where feasib	le.)	****		
The purpose of Modification 05/14/2011 at no additional of Please contact COTR, Dwayne 301-443-1911 for invoicing in ADB Document#: D1000072 Discount Terms: PROMPT PAY Continued	cost. Al Forquer nstructi	l other terms at 301-594-1 ons and payme	s a 306 ent	and conditions remain unch	nang	ed.	at	
450 000170 000000000000000000000000000000		-	-	OBIN M. IRVING				
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED	16	B. UNITED STATES OF AMERICA		160	DATE SIGNED	
(Signature of person authorized to sign)			-	(Signature of Contracting Officer)		-		

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CONTINUATION SHEET REFEREN

REFERENCE NO. OF DOCUMENT BEING CONTINUED
HHSN2639999000461/HHSN26100001/0003

PAGE 2

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NAME OF OFFEROR OR CONTRACTOR

M NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
A)	(B)	(C)	(D)	(E)	(F)
	Payment:				, ,
	NIH Commercial Accts				
	Commercial Accounts Branch				
	2115 East Jefferson St, MSC 8500	1			
	Room 4B-432		1 1		
	Bethesda			I	
	MD 20892-8500				
	Period of Performance: 06/15/2010 to 05/14/2011				
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2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	1/	REQUISITION/PURCHASE REQ. NO.	JS 222	1 5	
0004	04/28/2011	1	NEGOTION ON ON ON ON ON ON	D. PRO.	JECT NO. (If applicable)	
6. ISSUED BY CODE		17	ADMINISTERED BY (If other than Item 6)	CODE		
National Institutes of Heal NIH Info Tech Acquisition and Assessment Center Bethesda ND 20892-7511	th	N N A B	ational Institutes of Hea IH Info Tech Acquisition ssessment Center ethesda D 20892-7511	alth	ADM-OLAO/NIT	'AAC
		1	2 2 2 1 3 2 2			
NAME AND ADDRESS OF CONTRACTOR (No., street) OOZ ALLEN & HAMILTON INC: 11		(x)	9A. AMENDMENT OF SOLICITATION NO.			
283 GREENSBORO DRIVE CLEAN VA 221023838	V 1 & 4 &		9B. DATED (SEE ITEM 11)			
		x	10A. MODIFICATION OF CONTRACT/ORDER I HHSN2 639999000461 HHSN2 6100001 10B. DATED (SEE ITEM 13)	NO.		
ODE	FACILITY CODE		06/14/2010			
	11. THIS ITEM ONLY APPLIES TO) AME	NOMENTS OF SOLICITATIONS			
A. THIS CHANGE ORDER IS ISSUED F ORDER NO. IN ITEM 10A.	PURSUANT TO: (Specify authority) Th	1E CH/	I MODIFIES THE CONTRACT/ORDER NO. AS DE ANGES SET FORTH IN ITEM 14 ARE MADE IN T ADMINISTRATIVE CHANGES (such as changes ITY OF FAR 43.103(b).	THE CONTI	RACT	
C. THIS SUPPLEMENTAL AGREEMEN X Mutual Agreement						
D. OTHER (Specify type of modification	and authority)					
IMPORTANT: Contractoris not.	is required to sign this document a	and ends	m 2 conjes to the issuing			
DESCRIPTION OF AMENDMENT/MODIFICATION (DEE HHSN263999900046I for col	Organized by UCF section headings, ntract terms and co.	<i>includii</i> ndit	ng solicitation/contract subject matter where feasil ions.	ble.)		
ne purpose of Modification (0 05/14/2011 at no additiona	0004 is to extend to	he p	period of performance for as and conditions remain	all l unchar	line items	
ease contact COTR, Dwayne 01-443-1911 for invoicing in	Forquer at 301-594-	-306	9 or requisitioner, Coll	en Enr	nis at	
B Document#: D1000072	4 - 2 -		1 00000113			
scount Terms: PROMPT PAY						
livery Location Code: 6116						
<pre>16 Executive Blvd, Rockvill ntinued</pre>						
	document referenced in them 0.4 4:	٦٥	paratofore abound			
cept as provided herein, all terms and conditions of the A. NAME AND TITLE OF SIGNER (Type or print)	See Agent Andrews of the Section of	16.	A. NAME AND TITLE OF CONTRACTING OFFIC	ER (Type	or print)	
B. CONTRACTOR/OFFEROR	15C. DATE SIGNED		DBIN M. IRVING B. UNITED STATES OF AMERICA		16C. DATE SIGNED)
			KURUNEX		dlach.	
(Signature of person authorized to sign)			(Signature of Contracting Officer)		7128/11	

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STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243

CONTRULATION OUTET	REFERENCE NO. OF DOCUMENT BEING CONTINUED
CONTINUATION SHEET	HHSN2639999000461/HHSN26100001/0004

PAGE 5 2

NAME OF OFFEROR OR CONTRACTOR BOOZ ALLEN & HAMILTON INC:1107242

(A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	(D)	UNIT PRICE	AMOUNT (F)
	6116 Executive Blvd	107	12)	15)	(E)
	Rockville MD 20852 US				
	ROCKVIIIE MD 20052 05				
	Payment:			į į	
	NIH Commercial Accts				
	Commercial Accounts Branch				
	2115 East Jefferson St, MSC 8500				
	Room 4B-432				
	Bethesda			7	
	MD 20892-8500				
	FOB: Destination				
	Period of Performance: 06/15/2010 to 05/14/2011				
	Change Item 1 to read as follows(amount shown is				
	the obligated amount):				
	Special Handling: None				
	HHSN263999900046I, Task order (C2730) caBIG				0
	Program Management Support Contract POP				
	6/15/2010-1/14/2011 - Tasks 5.1-5.5 Time and				
	Materials				
	Delivery To: 2115/6000				
	Product/Service Code: R499				
	Product/Service Description: OTHER PROFESSIONAL				
	SERVICES			İ	
	Project Petro				
	Project Data:				
	125837.1.HNC1D NCI OD CBIIT CTR BIOMEDICAL				
	INFORMATICS & INFORMATION.252Z ALL OTHER SERVICES			İ	
	WITH T.06/10/2010	1			
	Accounting Info:				
	08024920101DA0.2010.01.C100.HNC1D00000C.E.00016.40				
	6.C283.2522.610001.9999.9999.9999				
	Funded: \$0.00				
	Change Item 2 to read as follows(amount shown is				
	the obligated amount):				•
	Special Handling: None			İ	
	HHSN263999900046I, Task order (C2730) caBIG				
	Program Management Support Contract POP				0
	6/15/2010-1/14/2011 - Task 5.6 CPFF Participant		- 1		
	Delivery To: 2115/6000	1			
	Product/Service Code: R499				
	Product/Service Description: OTHER PROFESSIONAL				
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 CONTINUATION SHEET
 REFERENCE NO. OF DOCUMENT BEING CONTINUED
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NAME OF OFFEROR OR CONTRACTOR

Project Data: 125837.1.NNCID NCI OD CBIIT CTR BIOMEDICAL INFORMATICS & INFORMATION.252Z ALL OTHER SERVICES WITH T.06/10/2010 Accounting Info: 08024920101DA0.2010.01.C100.HNCID00000C.E.00016.40 6.C283.252Z.610001.9999.9999.9999 Funded: \$0.00 Change Item 3 to read as follows(amount shown is the obligated amount): Special Handling: None HHSN263999900046I, Task order (C2730) CaBIG Program Management Support Contract POP 6/15/2010-1/14/2011 - Other Direct Costs Delivery To: 2115/6000 Product/Service Code: R499 Product/Service Description: OTHER PROFESSIONAL SERVICES Project Data: 125837.1.HNCID NCI OD CBIIT CTR BIOMEDICAL INFORMATICS & INFORMATION.252Z ALL OTHER SERVICES WITH T.06/10/2010 Accounting Info: 08024920101DA0.2010.01.C100.HNC1D00000C.E.00016.40 6.C283.252Z.610001.9999.9999.9999 Funded: \$0.00 Change Item 4 to read as follows(amount shown is the obligated amount): Special Handling: None CaBIG Program Management Support Contract - Line	UNT
125837.1.HNCID NCI OD CBIIT CTR BIOMEDICAL INFORMATICS & INFORMATION.2522 ALL OTHER SERVICES WITH T.06/10/2010 Accounting Info: 0802492010101A0.2010.01.C100.HNCID00000C.E.00016.40 6.C283.2522.610001.9999.9999.9999 Funded: \$0.00 Change Item 3 to read as follows(amount shown is the obligated amount): Special Handling: None HHSNN2639999000461, Task order (C2730) CaBIG Program Management Support Contract POP 6/15/2010-1/14/2011 - Other Direct Costs Delivery To: 2115/6000 Product/Service Code: R499 Product/Service Description: OTHER PROFESSIONAL SERVICES Project Data: 125837.1.HNCID NCI OD CBIIT CTR BIOMEDICAL INFORMATICS & INFORMATION.2522 ALL OTHER SERVICES WITH T.06/10/2010 Accounting Info: 08024920101DA0.2010.01.C100.HNCID00000C.E.00016.40 6.C283.252Z.610001.9999.9999.9999 Funded: \$0.00 Change Item 4 to read as follows(amount shown is the obligated amount): Special Handling: None caBIG Program Management Support Contract - Line	F)
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Item 4 - Administrative NITAAC Fee	0.0
Delivery To: 6116/501	
Product/Service Code: R499	
Product/Service Description: OTHER PROFESSIONAL	
SERVICES	
Project Data:	
125837.1.HNC1D NCI OD CBIIT CTR BIOMEDICAL	
INFORMATICS & INFORMATION.252Z ALL OTHER SERVICES	
WITH T.06/21/2010	
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CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED HHSN263999900046I/HHSN26100001/0004

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NAME OF OFFEROR OR CONTRACTOR

ITEM NO.	SUPPLIES/SERVICES	QUANTITY		UNIT PRICE	AMOUNT
(A)	(B)	(C)	(D)	(E)	(F)
	Accounting Info: 08024920101DA0.2010.01.C100.HNC1D00000C.E.00016.40 6.C283.252Z.610001.9999.9999.9999 Funded: \$0.00				
	Change Item 5 to read as follows(amount shown is the obligated amount):				
5	Special Handling: None 402 - HHSN263999900046I, Task Order C2730, Booz Allen Hamilton, caBIG Program Management Support contract, POP 1/15/11-5/14/11 Delivery To: 6116/501 Product/Service Code: R499 Product/Service Description: OTHER PROFESSIONAL SERVICES				0.0
	Project Data: 125837.1.HNClD NCI OD CBIIT CTR BIOMEDICAL INFORMATICS & INFORMATION.2555 RESEARCH AND DEVELOPMENT.12/14/2010 Accounting Info: 08024920111DA0.2011.01.C100.HNClD00000C.E.00016.40 6.C283.2555.610001.9999.9999.9999 Funded: \$0.00				
	Change Item 6 to read as follows(amount shown is the obligated amount):		and the state of t		
6	Special Handling: None 402 - HHSN263999900046I, Task Order C2730, Booz Allen Hamilton, caBIG Program Management Support contract, POP 1/15/11-5/14/11, 1% NITAAC Fee Delivery To: 6116/501 Product/Service Code: R499 Product/Service Description: OTHER PROFESSIONAL SERVICES				0.04
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	6.C283.2555.610001.9999.9999.9999 Funded: \$0.00				

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NAME OF OFFEROR OR CONTRACTOR

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